Answers to Your Questions:

Respiratory isolation and admission procedures for outpatients with tuberculosis (TB)

What is TB?

TB is short for tuberculosis, a serious disease that can be spread from person to person. It is caused by a bacterium called *Mycobacterium tuberculosis*. In most people who are infected with TB, symptoms do not develop right away. The bacteria may stay dormant for many years and never cause disease. This is known as the "passive phase." If the bacteria multiply, disease may occur in the lungs, and sometimes the brain, spine, or kidneys. This is known as the "active phase."

Symptoms of active TB include:

- weakness
- weight loss
- fever
- night sweats
- cough
- chest pain
- coughing up blood
- abnormal chest x ray

How is TB spread?

Only persons with "active" TB can spread TB. When persons with active TB cough or sneeze, the bacteria may be spread into the air and can remain suspended in the air for a long time. Other people can get infected if they breathe in the TB bacteria. Always covering your mouth and nose when you cough or sneeze is an important way to help prevent the spread of TB.

How is active TB diagnosed?

The results of tests such as chest x rays and sputum examinations are used to find out if you have active disease. Your doctor will explain these tests and the results of the tests to you.

If you have active TB, NIH staff will work with you, your community doctor and your local health department to find out if family members or other close contacts are at risk for getting TB. Your community physician and local health department will also help to manage the treatment of your TB.

How is active TB treated?

Active TB disease is treated with several medications that need to be taken for a long time. Although you may get tired of taking the medicines every day, it is important to take them as prescribed in order to treat your disease properly and to prevent spreading TB to other people. During treatment, your doctor will check for side effects and tell you how well the medicines are working.

How to help yourself during treatment

- ✓ Know the names of your medications, what they do, and when to take them.
- ✓ **Take** your medications as prescribed.
- ✓ Report any side effects to your doctor.



What is respiratory isolation?

Respiratory isolation is a way to prevent other patients, staff, and visitors from breathing in the TB bacteria breathed out from a person with active TB. The person in isolation will use a private hospital room with a special air system that provides fresh air to the room while preventing the room's air from going to the rest of the building. The door to this room must stay closed.

Where you will stay

A private clinic room will be assigned to you. The door to this room must stay closed.

Wearing masks

Anyone entering your room must wear a special mask or battery-powered breathing gear. Hospital staff will instruct visitors how to use this equipment.

Room restrictions

As long as your doctor states that you may active TB, it is important that you stay in your clinic room as much as possible. If you want to leave your room for any reason, check with your nurse.

Leaving your room

If you must leave the clinic room, the staff will give you a surgical mask and show you how to wear it with a good fit. To protect you and others in the area, a staff member will go with you when you leave your room. Be sure to take an extra mask and tissues. If you cough or sneeze, please cover your mouth—even when you wear a mask.

When will respiratory isolation end?

You will need to stay in respiratory isolation until your doctor determines that you do not have active TB or that you can no longer spread TB. Your cooperation with these special arrangements will help to prevent spreading TB to others.

How you can make respiratory isolation work for you and those around you

- ✓ Learn how TB is spread from person to person. The more you know about TB, the more you can help prevent its spread.
- ✓ Cover your mouth when you cough or sneeze.
- ✓ Tell the staff if you are bored or lonely. They can give you room activities to lessen the boredom.
- ✓ Feel free to ask about anything that concerns you. Our staff is always ready to assist you.

Preparing for your outpatient visit

- 1. The day before your visit
 - Call your contact at the Clinical Center to confirm the date and time of your appointment. Make sure that you arrive on your scheduled day and time.
 - Ask your contact if you need to bring specimens to the clinic, such as an early morning sputum. Make sure you



understand what specimens to bring, how to collect them, and how to transport them safely to the Clinical Center.

2. The day of your visit

Do not use public transportation (such as a bus or train) to come to the Clinical Center. Your Clinical Center contact will help you make safe travel arrangements. Have a close friend, family member, or other health care worker (for example, a social worker) go with you to the Clinical Center.

- If you have a clinic appointment, you must must bring your own refreshments. Because we cannot permit anyone with active TB to visit our cafeteria or vending machines, please pack the food or drink you may need. If your clinic appointment continues into mealtime, the Clinical Center will give you a meal.
- Bring a few masks from your home supply, tissues, a small meal or snack, and medications (TB medicines, cough suppressants).

3. Arrival at the Clinical Center

When you reach the Clinical Center's main entrance, stay in your vehicle. The person with you should go inside the Clinical Center to the admissions desk and inform the admissions staff that you have arrived. A hospital staff member, wearing a special mask, will meet you at your vehicle. This person will help you (and anyone who came with you) to put on a mask. Then, you will be escorted directly to your clinic room.

4. Leaving the Clinical Center after your visit

When your clinic visit is over, a Clinical Center staff member will escort you outside the building using the same procedure as when you arrived.

Where can I get more information about respiratory isolation?

- Hospital Epidemiology Service, CC 301-496-2209
- Environmental Safety Officer, CC 301-496-5281
- www.cdc.gov health topics/tuberculosis



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This information is prepared specifically for patients participating in clinical research at the Warren Grant Magnuson Clinical Center at the National Institutes of Health and is not necessarily applicable to individuals who are patients elsewhere. If you have questions about the information presented here, talk to a member of your healthcare team.

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